



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE
DEPARTMENT OF STATE
DIVISION OF PROFESSIONAL REGULATION
DELAWARE BOARD OF PROFESSIONAL LAND SURVEYORS

TELEPHONE: (302) 744-4500
FAX: (302) 739-2711
WEBSITE: WWW.DPR.DELAWARE.GOV

APPLICATION FOR PERSONAL DEVELOPMENT HOURS

LICENSEE INFORMATION

Name: _____ Delaware License No. _____

Address: _____
Street, P.O. Box, Apt. City State Zip Code

Day Telephone: (____) _____ E-mail Address _____

SPONSOR/PROVIDER INFORMATION

Sponsored by: _____

Contact person/continuing education coordinator: _____

Address: _____
Street, Suite Number, Floor City State Zip Code

Business Telephone: (____) _____

PROGRAM INFORMATION

Program Title: _____

Program Dates: _____
Month/Day/Year Month/Day/Year

Total Personal Development Hours requested (excluding breaks): _____

Attach documentation (copies only) of course objectives, presenter's credentials and a detailed course schedule.

If you have any questions, you may reach the Board office by phone at (302)744-4500 or by e-mail at customerservice.dpr@state.de.us. A list of approved continuing education courses appears at www.dpr.delaware.gov/boards/landsurveyors/education.shtml.

DECISION (Board Use Only)

Board Meeting Date: _____

_____ Approved Total Personal Development Hours Granted: _____

_____ Denied Reason Denied: _____